


DATE: <u>1/2/02</u>	FROM: <u>Porter</u> (print name)
FORWARD TO: A. Art Unit: <u>2622</u> B. Class: <u>340</u> C Subclass: <u>825+</u>	REASON(S): <div style="display: flex; align-items: flex-start;"> <div style="flex: 1;"> A. You had Parent B. See Title C. See Abstract D. See Claim(s): <u>1</u> </div> <div style="flex: 0.5; text-align: center;"> <div style="border: 1px solid black; width: 60px; height: 30px; margin-bottom: 5px;"></div> <div style="font-size: 0.8em;">(check box)</div> <div style="border: 1px solid black; width: 60px; height: 30px; margin-bottom: 5px;"></div> <div style="font-size: 0.8em;">(check box)</div> <div style="border: 1px solid black; width: 60px; height: 30px;"></div> <div style="font-size: 0.8em;">(check box)</div> </div> </div>

claim is directed to switch matrix.

DATE: _____	FROM: _____ (print name)
FORWARD TO:	REASON(S):
A. Art Unit: _____	A. You had Parent <input type="checkbox"/> (check box)
B. Class: _____	B. See Title <input type="checkbox"/> (check box)
C Subclass: _____	C. See Abstract <input type="checkbox"/> (check box)
	D. See Claim(s): _____

FURTHER EXPLANATION IF NEEDED:

DATE: _____	FROM: _____ (print name)
FORWARD TO CLASSIFIER 	REASON(S): A. You had Parent <input data-bbox="904 1157 1039 1173" type="checkbox"/> (check box) B. See Title <input data-bbox="904 1173 1039 1188" type="checkbox"/> (check box) C. See Abstract <input data-bbox="904 1188 1039 1203" type="checkbox"/> (check box) D. See Claim(s): _____

FURTHER EXPLANATION IF NEEDED:

DISPOSITION BY 2700 CLASSIFICATION

DATE: _____	CLASSIFIER: _____
FORWARD TO:	REASON(S):
A. Art Unit: _____	A. You had Parent <input type="checkbox"/> (check box)
B. Class: _____	B. See Title <input type="checkbox"/> (check box)
C Subclass: _____	C. See Abstract <input type="checkbox"/> (check box)
	D. See Claim(s): _____

FURTHER EXPLANATION IF NEEDED: